

CLAIMS ONLY							Application Number 1017023, 365	Filing Date				
							* May be used for additional claims or amendments					
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend						
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
11												
12	1											
13		1										
14		1										
15		1										
16		1										
17		1										
18		1										
19		1										
20		1										
21		1										
22		1										
23		1										
24		1										
25		1										
26		1										
27		1										
28		1										
29	1											
30		1										
31		1										
32		3										
33		3										
34		1										
35	1											
36		1										
37		1										
38		1										
39		1										
40												
41												
42												
43												
44												
45												
46												
47												
48												
49												
50												
Total Indep												
Total Depend												
Total Claims												

5

44

49